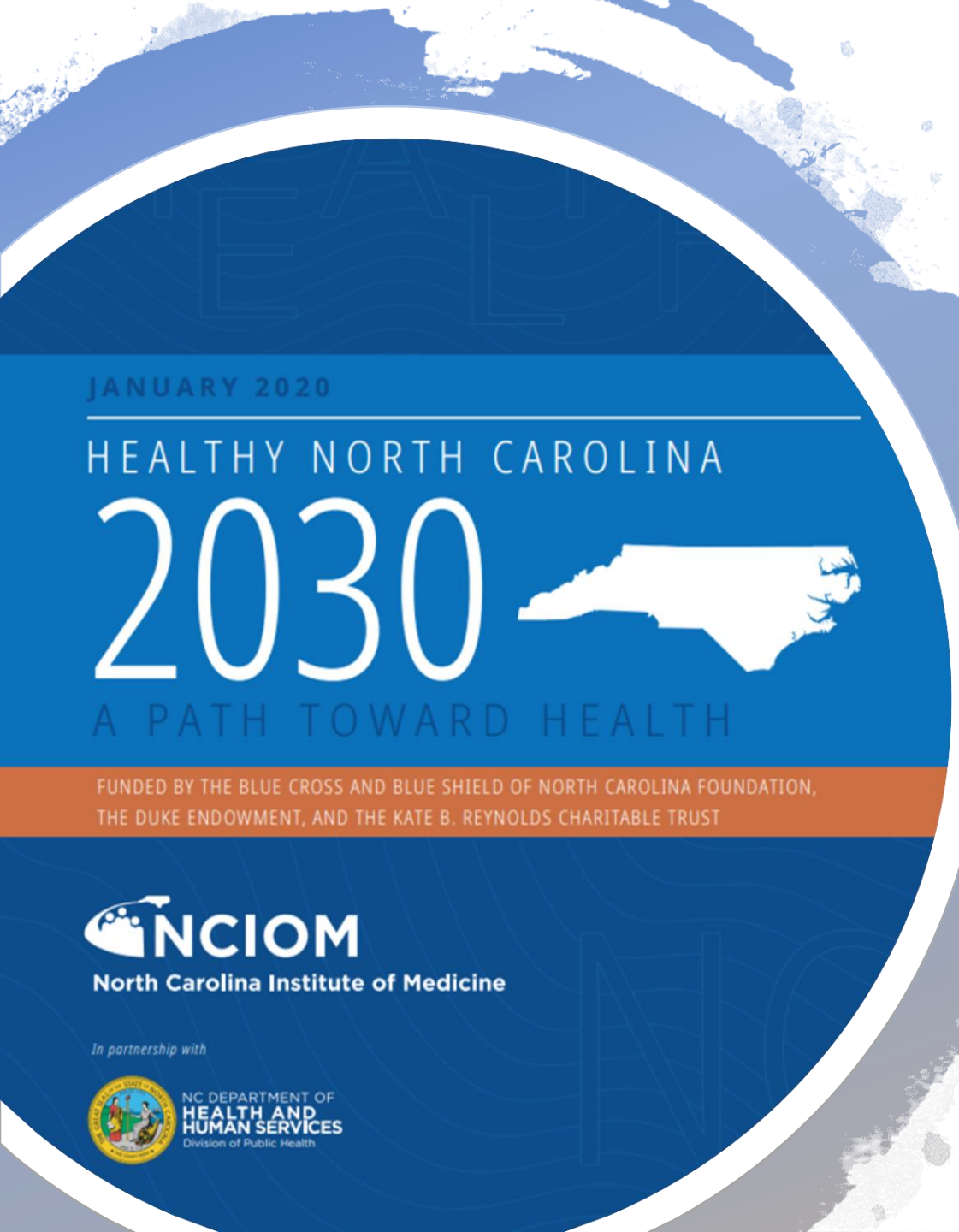
Disclosure Statement

The speaker declares that she nor any member of her family has a conflict of interest that would influence the content of this presentation.



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

NCPH North Carolina Public Health

Healthy North Carolina 2030

Kathryn Dail, RN PhD
State Center for Health Statistics
NC Division of Public Health

Today's Content

- Big Picture Overview
- HNC 2030
- RBA
- Clear Impact Scorecard™
- CHA/CHIP/SOTCH and SHA/SHIP
- Pulling It All Together
- Open for Comments

BIG PICTURE OVERVIEW

How does HNC 2030 mesh with the work of
Local Health Departments and the
Division of Public Health
Over the next decade?

Integrated Timeline:
NC State Health Assessment
HNC 2030
NC State Health Improvement Plan

Statewide Health Assessment Process

2018-2019

HNC 2030 Indicators

July 2018 – December 2019

State Health Improvement Process

Beginning January 2020

Local/Regional Community Health/Health Needs Assessments

Local/Regional Community Health Improvement Plans

Track Progress
Results Based Accountability & Scorecard ™

January 2020 → January 2025 → December 2029

BIG PICTURE OVERVIEW

Question

How does HNC 2030 mesh with the work of

Local Health Departments and the

Division of Public Health

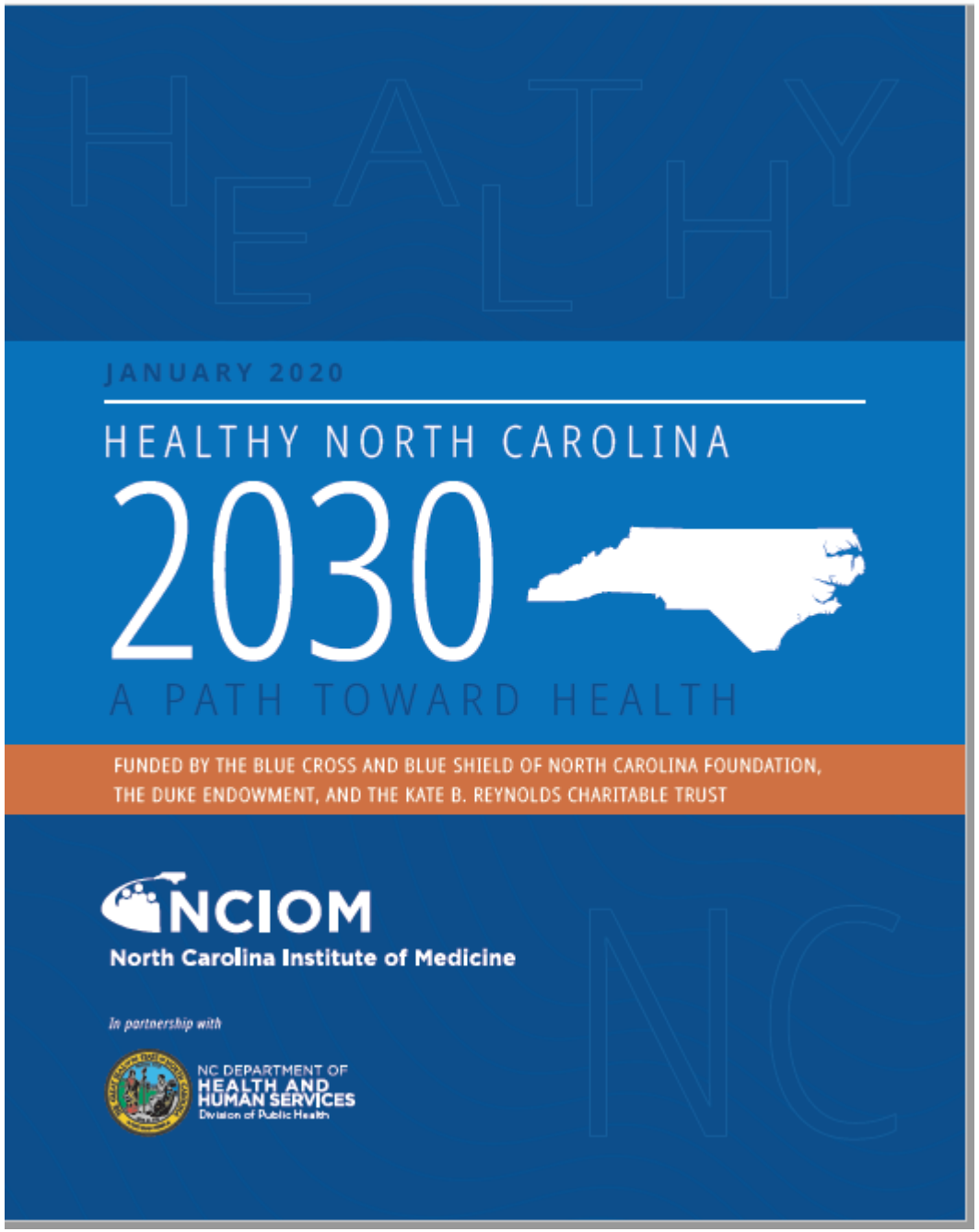
Over the next decade?

Answer

Just like local health departments conducting community health assessments (CHAs), the Division of Public Health conducted a State Health Assessment (SHA) in 2019 that led to the publication of the HNC 2030 Indicators. Just like LHDs and their partners, community health improvement plans, “CHIPs”, and the state “SHIP” will use these indicators as population measures for the next decade. DPH and LHDs will track progress using Clear Impact Scorecard.

HNC 2030

How is HNC 2030 different from/similar to HNC 2020?

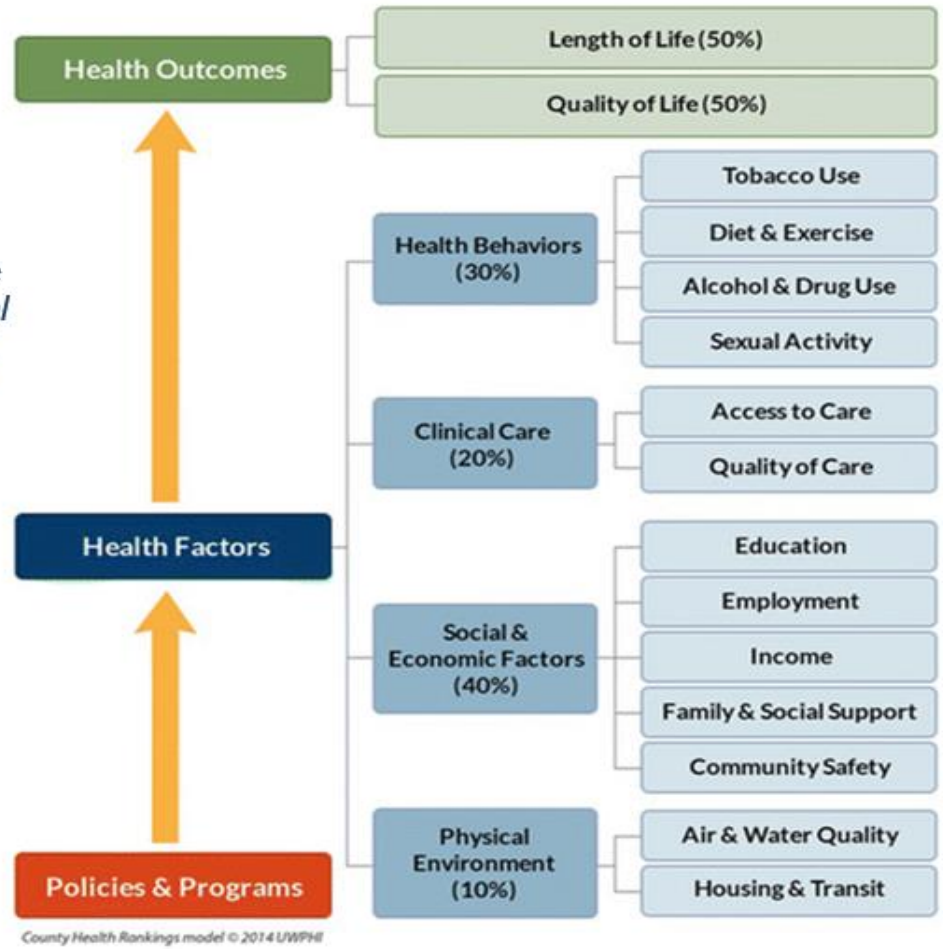

HEALTHY
JANUARY 2020
HEALTHY NORTH CAROLINA
2030
A PATH TOWARD HEALTH
FUNDED BY THE BLUE CROSS AND BLUE SHIELD OF NORTH CAROLINA FOUNDATION,
THE DUKE ENDOWMENT, AND THE KATE B. REYNOLDS CHARITABLE TRUST
NCIOM
North Carolina Institute of Medicine
In partnership with
NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES
Division of Public Health
NC

Shift to a Population Health Framework

HNC 2020 Focus Areas (40 Objectives)

1. Tobacco Use
2. Nutrition and Physical Activity
3. Sexually Transmitted Diseases
   Unintended Pregnancy
4. Substance Abuse
5. Environmental Risks
6. Injury and Violence Prevention
7. Infectious Disease and
   Foodborne Illness
8. Mental Health
9. Oral Health
10. Maternal and Infant Health
11. Chronic Disease
12. Social Determinants of Health
13. Cross-cutting Measures

"We will use HNC 2030 to re-orient public health! We shift from a focus on individual health topics to a focus on health equity and overall drivers of health outcomes."



CHR Model: University of Wisconsin Population Health Institute. County Health Rankings & Roadmaps 2018. www.countyhealthrankings.org. Image used with permission of UWPHI

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

NCPH North Carolina Public Health

HNC 2030 Indicators

Social and Economic Factors

1. Individuals below 200% FPL
2. Unemployment
3. Short-term Suspensions
4. Incarceration rate
5. Adverse Childhood Experiences
6. Third Grade Reading Proficiency

Physical Environment (Built)

7. Access to Exercise Opportunities
8. Limited Access to Healthy Foods
9. Severe Housing Problems

Health Behaviors

10. Drug Overdose Deaths
11. Tobacco Use
12. Excessive Drinking
13. Sugar-Sweetened beverage consumption
14. HIV Diagnosis
15. Teen Birth Rate

Clinical Care

16. Uninsured
17. Primary Care Clinicians
18. Early prenatal Care
19. Suicide Rate

Overarching

20. Infant Mortality
21. Life Expectancy

TABLE 1

HEALTH INDICATORS AND DATA

(TOTAL NC POPULATION, 2030 TARGET, AND DATA BY RACE/ETHNICITY, SEX, AND POVERTY LEVEL)

	HEALTH INDICATOR	DESIRED RESULT	TOTAL POPULATION CURRENT (YEAR)	TOTAL POPULATION 2030 TARGET
1	INDIVIDUALS BELOW 200% FPL	Decrease the number of people living in poverty	36.8% (2013-17)	27.0%
2	UNEMPLOYMENT	Increase economic security	7.2% (2013-17)	Reduce unemployment disparity ratio between white and other populations to 1.7 or lower
3	SHORT-TERM SUSPENSIONS (PER 100 STUDENTS)	Dismantle structural racism	1.39 (2017-18)	0.80
4	INCARCERATION RATE (PER 100,000 POPULATION)		341 (2017)	150
5	ADVERSE CHILDHOOD EXPERIENCES	Improve child well-being	23.6% (2016-17)	18.0%
6	THIRD GRADE READING PROFICIENCY	Improve third grade reading proficiency	56.8% (2018-19)	80.0%
7	ACCESS TO EXERCISE OPPORTUNITIES	Increase physical activity	73% (2018/19)	92%
8	LIMITED ACCESS TO HEALTHY FOOD	Improve access to healthy food	7% (2015)	5%
9	SEVERE HOUSING PROBLEMS	Improve housing quality	16.1% (2011-15)	14.0%
10	DRUG OVERDOSE DEATHS (PER 100,000 POPULATION)	Decrease drug overdose deaths	20.4 (2018)	18.0
11	TOBACCO USE	Decrease tobacco use	YOUTH 19.8% (2017) ADULT 23.8% (2018)	9.0% 15.0%
12	EXCESSIVE DRINKING	Decrease excessive drinking	16.0% (2018)	12.0%
13	SUGAR-SWEETENED BEVERAGE CONSUMPTION	Reduce overweight and obesity	YOUTH 33.6% (2017) ADULT 34.2% (2017)	17.0% 20.0%
14	HIV DIAGNOSIS (PER 100,000 POPULATION)	Improve sexual health	13.9 (2018)	6.0
15	TEEN BIRTH RATE (PER 1,000 POPULATION)		18.7 (2018)	10.0
16	UNINSURED	Decrease the uninsured population	13% (2017)	8%
17	PRIMARY CARE CLINICIANS (COUNTIES AT OR BELOW 1:1,500 PROVIDERS TO POPULATION)	Increase the primary care workforce	62 (2017)	25% decrease for counties above 1:1,500 providers to population
18	EARLY PRENATAL CARE	Improve birth outcomes	68.0% (2018)	80.0%
19	SUICIDE RATE (PER 100,000 POPULATION)	Improve access and treatment for mental health needs	13.8 (2018)	11.1
20	INFANT MORTALITY (PER 1,000 BIRTHS)	Decrease infant mortality	6.8 (2018) Black/white disparity ratio = 2.4	6.0 Black/white disparity ratio = 1.5
21	LIFE EXPECTANCY (YEARS)	Increase life expectancy	77.6 (2018)	82.0

Source: See descriptions of health indicators throughout this report for information on data sources.

HNC 2030

Question

How is HNC 2030 different from/like HNC 2020?

HNC 2020 had 40 “Objectives”

HNC 2030 has 21 “Indicators”

Answer

HNC 2020 had a focus on individual health topics.

HNC 2030 has a focus on health equity and the overall drivers of health.

HNC 2030 follows the Population Health Model – just like Healthy People 2030.

RBA

What is RBA?

Why Use RBA?

Why are SMART GOALS not good enough?

What is RBA?

"Results-Based Accountability™ is a disciplined way of thinking and acting to improve entrenched and complex social problems. Communities use it to improve the lives of children, youth, families, adults. RBA is also used by organizations to improve the effectiveness of their programs."

Characteristics:

- **Disciplined Thinking**
- **Data Driven**
- **Transparent Decision-Making**
- **Common Sense**
- **Plain Language**
- **Talk to Action**
- **Ends to Means**

3

Common Language for Ideas
Results-Based Accountability

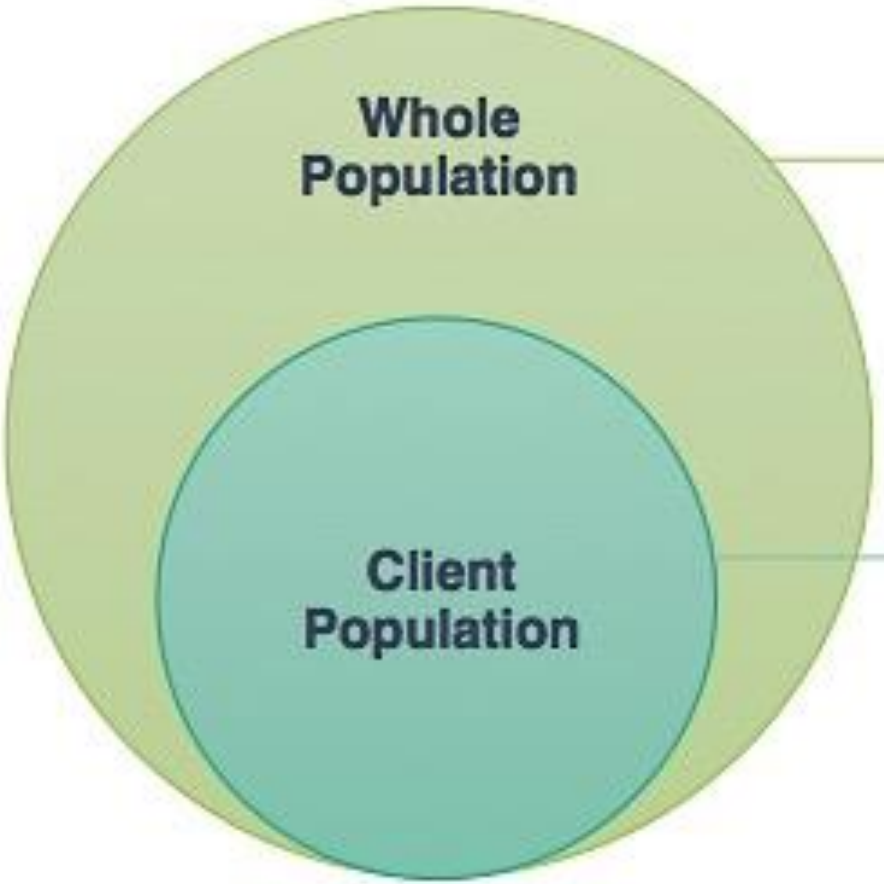
2 Kinds of Accountability

3 Types of Performance Measures

5 Core Questions to “Turn the Curve”

Results-Based Accountability

Is made up of two parts



Population Accountability

The well-being of Whole Populations
Communities, Cities, Counties, States, Nations

Performance Accountability

The well-being of Client Populations
Programs, Agencies, Service Systems

Results

Results

- ***Results are conditions of well-being for entire populations*** *— children, adults, families or communities, stated in plain language.*
- *Results include: "healthy children, children ready for school, children succeeding in school, children staying out of trouble, strong families, elders living with dignity in settings they prefer, safe communities, a healthy clean environment, a prosperous economy."*

Populations
and Subpopulations

All people

All children prenatal to 5 years old

All seniors

People with developmental disabilities

African American males

Geographic Area

Country: United States of America

State: North Carolina

County: Wake County

City: Charlotte

Community Neighborhood

Conditions of Well Being

All People of the United States are healthy

All North Carolina children enter school ready to learn

All seniors in Wake County thrive in safe neighborhoods

All people with developmental disabilities in Charlotte have equitable access to transportation

African American males in southeast Raleigh are economically secure

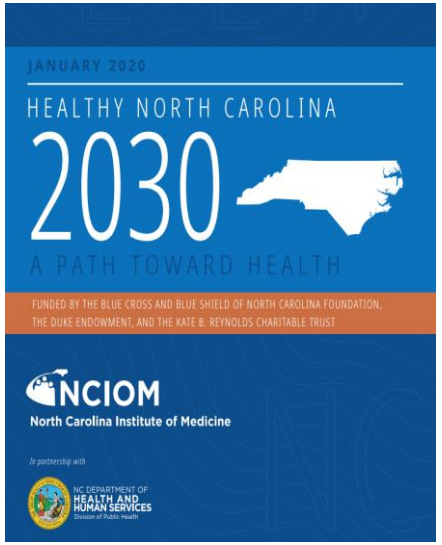
Developing a Results Statement

Population (or subpopulation) ✚ Geographic area ✚ Condition of well being

- Use simple, plain language
- Positively stated
- Avoid referencing data or improvement
- Avoid referencing services

Indicators

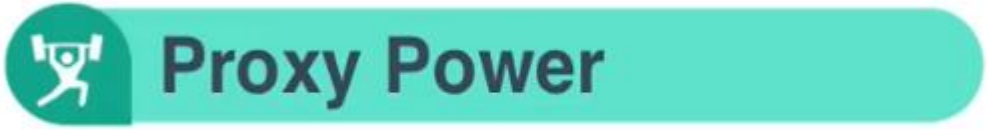
Indicators



- *Indicators are measures that help quantify the achievement of a population result.*
- *They answer the question "How would we recognize these results in measurable terms if we fell over them?"*
- *So, for example, the rate of low-birth weight babies helps quantify whether we're getting healthy births or not.*
- *Third grade reading scores help quantify whether children are succeeding in school today, and whether they were ready for school three years ago.*
- *The crime rate helps quantify whether we are living in safe communities, etc.*
- ***Indicators refer only to whole populations, not programs.***

Criteria for Selecting Headline Indicators

Does the indicator communicate to a broad range of audiences? Is it easily understood?



Does the indicator say something of central importance about the result?
Does the indicator bring along heard data?

Does the indicator provide quality data on a timely basis?

Three Types of Performance Measures

How much did we do?

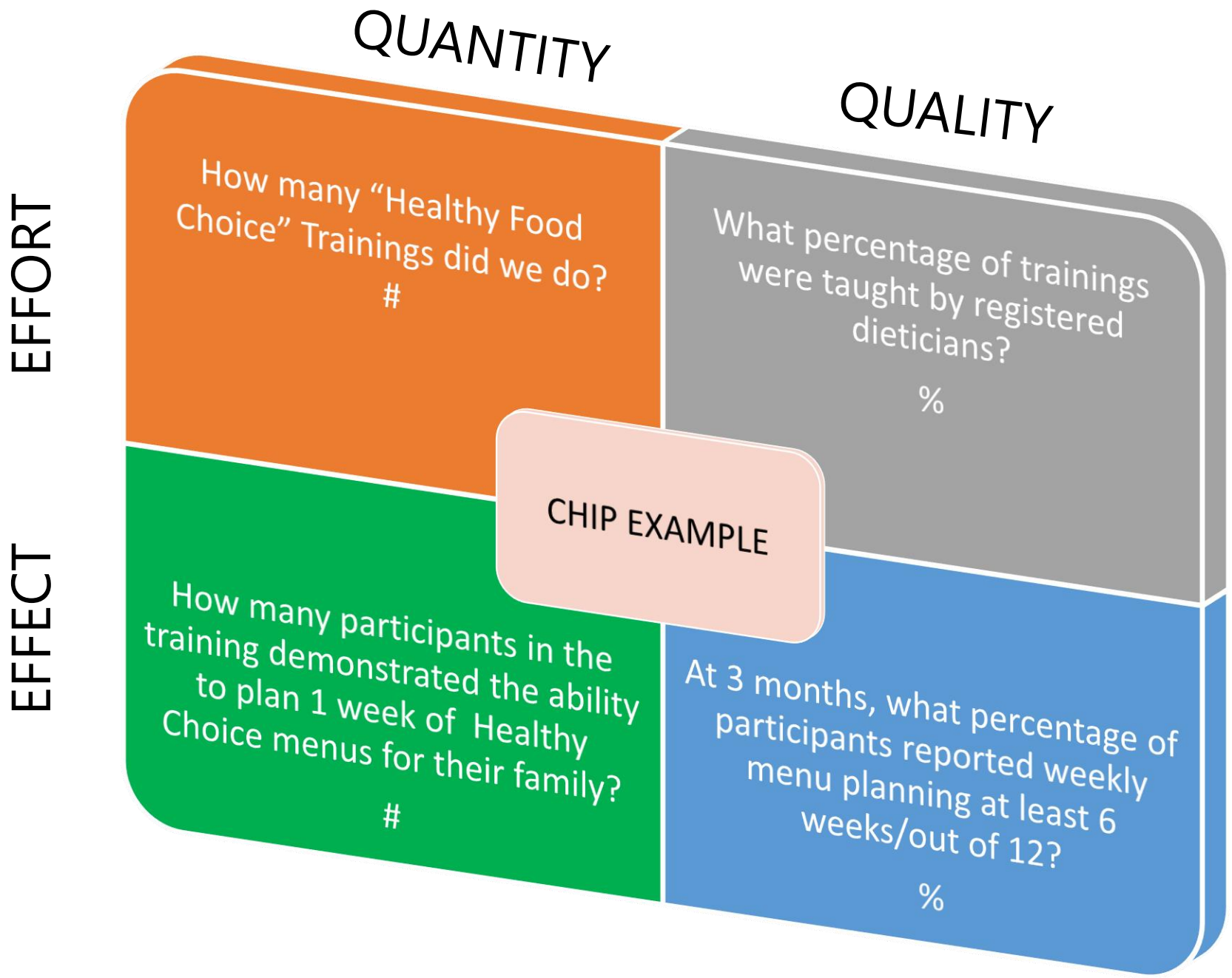
- Who are our customers and what services do we provide for them?

How well did we do it?

- How well do we provide these services?

Is anyone better off?

- What is the desired impact of those services on our customers ("customer results")?


QUANTITY
QUALITY
EFFORT
EFFECT
How many "Healthy Food Choice" Trainings did we do?
#
What percentage of trainings were taught by registered dieticians?
%
CHIP EXAMPLE
How many participants in the training demonstrated the ability to plan 1 week of Healthy Choice menus for their family?
#
At 3 months, what percentage of participants reported weekly menu planning at least 6 weeks/out of 12?
%

Turn the Curve Thinking

How are we doing?

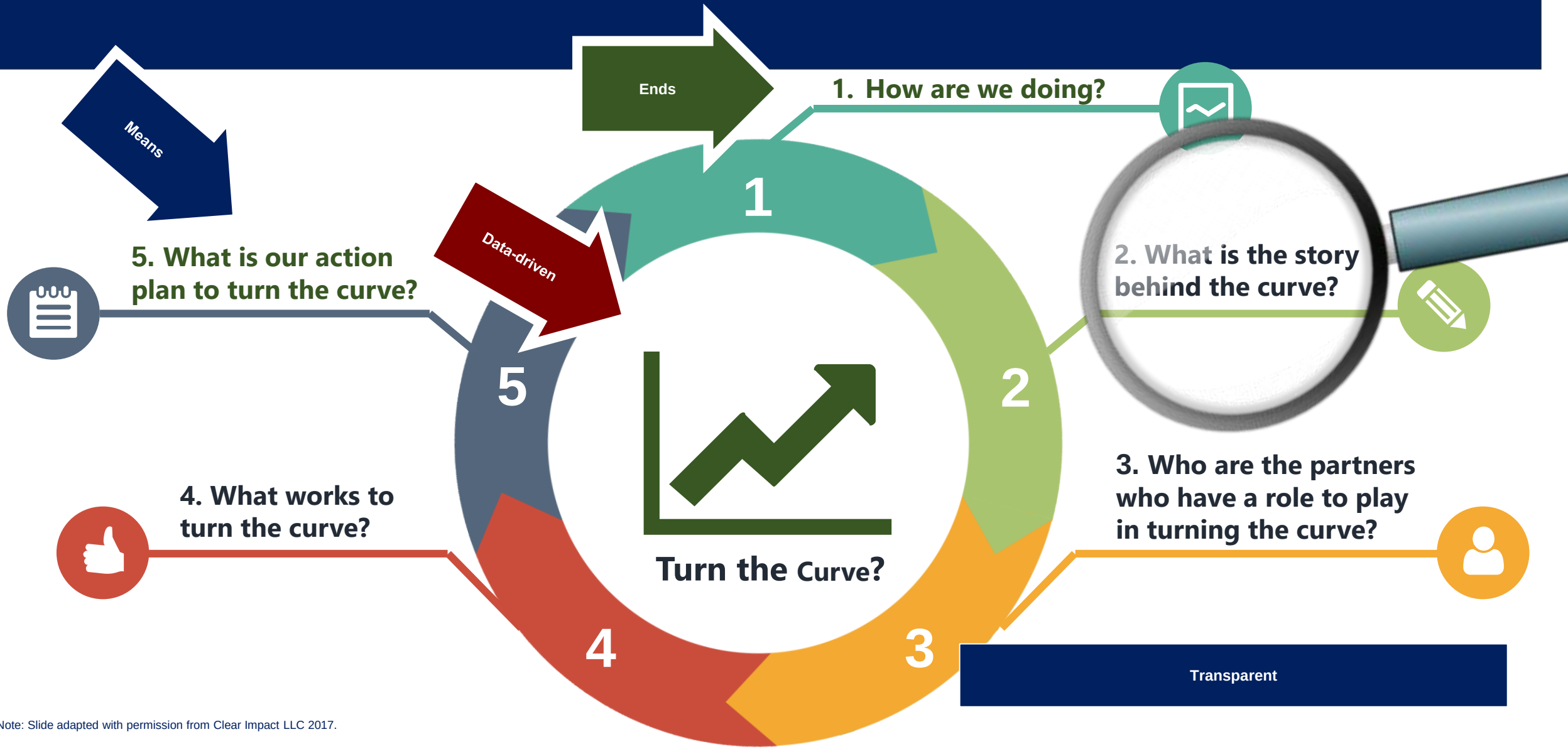
What is the Story Behind the Curve?

Who are the partners who have a role to play in turning the curve?

What works to turn the curve?

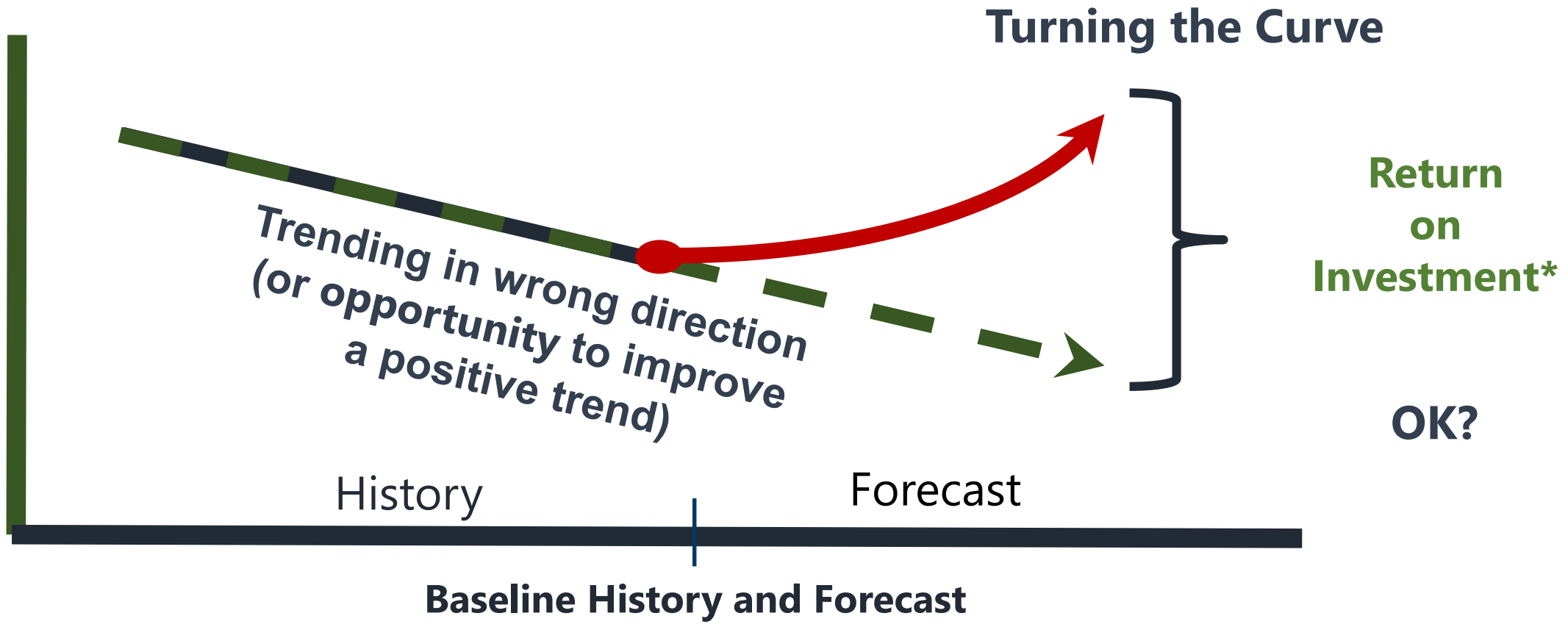
What is our action plan to turn the curve?

Turn the Curve Thinking: Five Core Questions



Note: Slide adapted with permission from Clear Impact LLC 2017.

How Are We Doing?

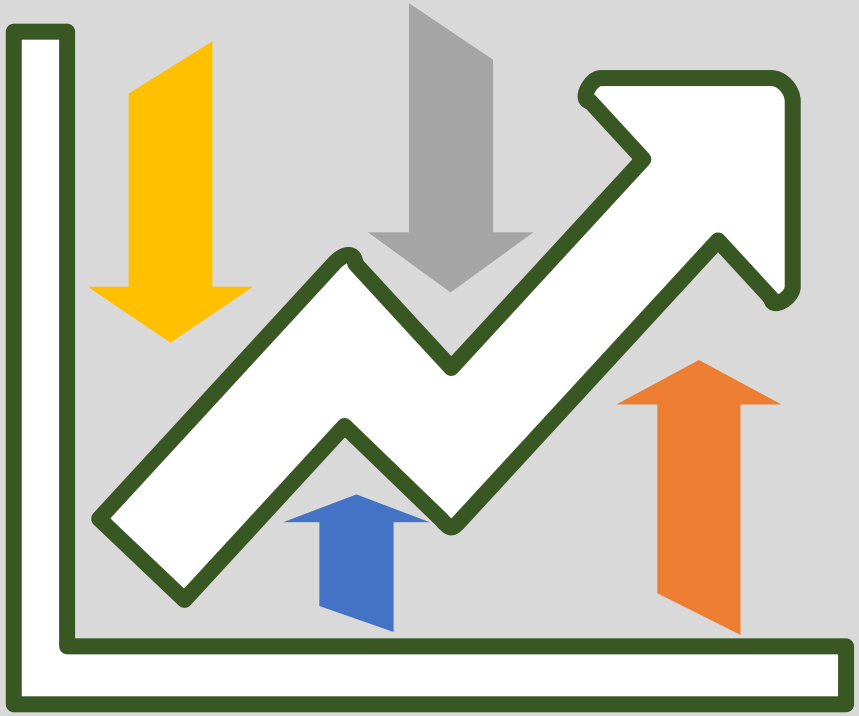


* The "ROI" is the change in the trend line.

Note: Slide adapted with permission from Clear Impact LLC 2017.

Story Behind the Curve

Restricting Factors?



Contributing Factors?

Root Causes

- "Why?" five times
- Positive & Negative Factors
- Internal & External Factors
- Current Situation
- Anticipated Situation

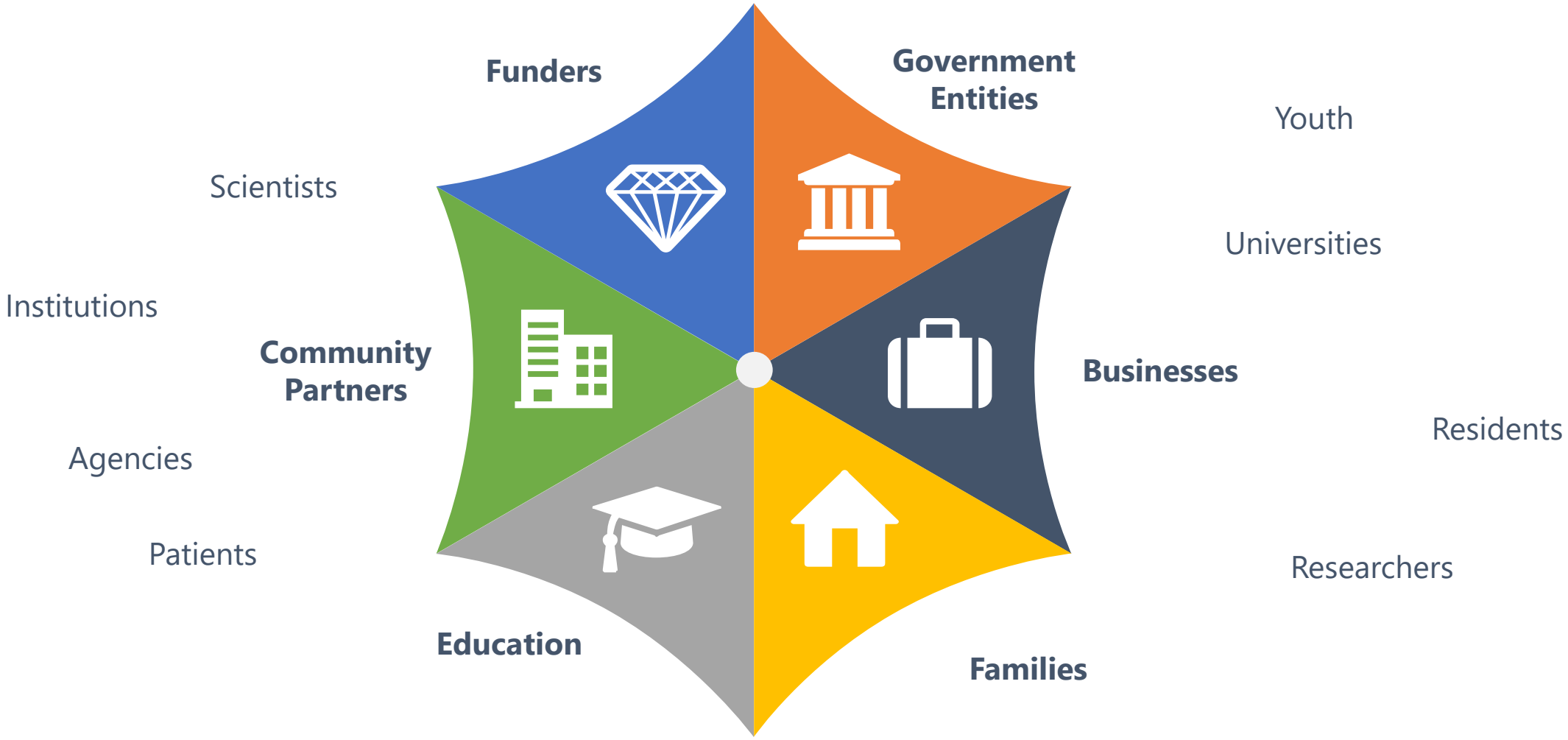
- Prioritized

- Before Strategies/Action Plans

Note: Slide adapted with permission from Clear Impact LLC 2017.

Partners

Does the story behind the curve suggest any new partners?



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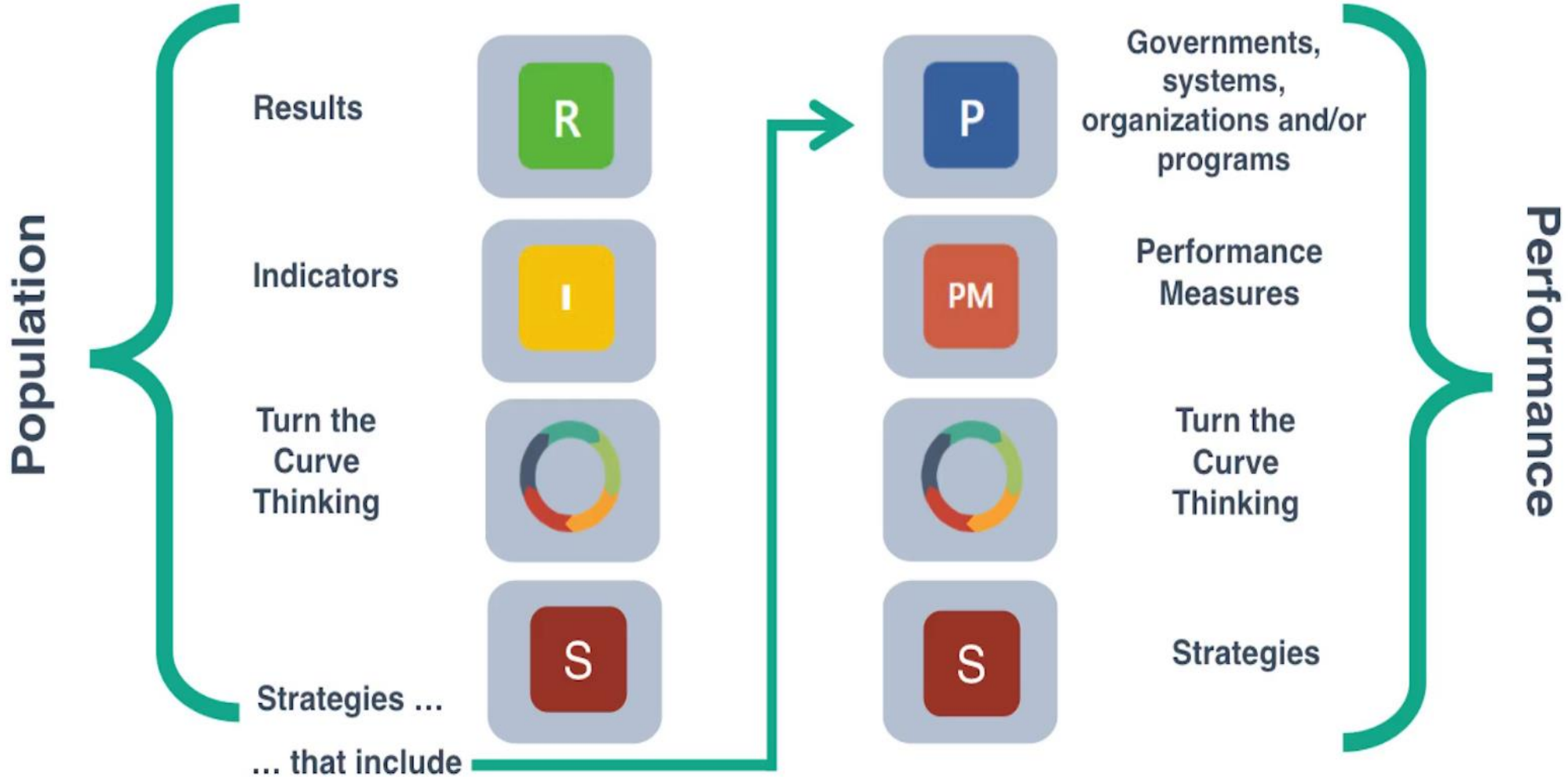
A Fundamental Distinction

	Concept	Term	Examples	Symbol
Population Accountability	*A condition of well-being for children, adults, families or communities.*	**Result ("Population Result")**	• Children Born Healthy • Safe Communities • Clean Environment • Prosperous Economy	R
	A measure which helps quantify the achievement of a result.	**Indicator**	• Rate of low-birth weight babies • Crime rate • Air quality index • Unemployment rate	I
Performance Accountability	*Any government, system, organization or program (down to the smallest unit) providing services and/or resources to a set of "customers."*	**Government, Service System, Agency, Division, Program, etc.**	• City of Leeds • Fairfax County Human Services System • New Zealand Ministry of Education • United Way of Johannesburg • Human Resources Division • Waterway Restoration Program	P
	A measure of how well a program, agency or service system is working.	**Performance Measure**	Three Types 1. How much did we do? 2. How well did we do it? 3. Is anyone better off? **("Customer Result")**	PM

Population vs. Performance Accountability



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Result, Indicator or Performance Measure?

Residents of Charlotte are economically secure with jobs that can support the needs of families.

RBA

Question

What is RBA?

Why Use RBA?

Why are SMART GOALS not good enough?

Answer

RBA is a disciplined way of thinking and acting that gets from talk to action quickly to achieve results by focusing on data and dialogue.

RBA uses plain language.

How much ? How Well? Better Off?

RBA provides 2 levels of accountability:

Population and Program.

Goals do not equal Results.

Scorecard™

What is Scorecard™?

How much does it cost?

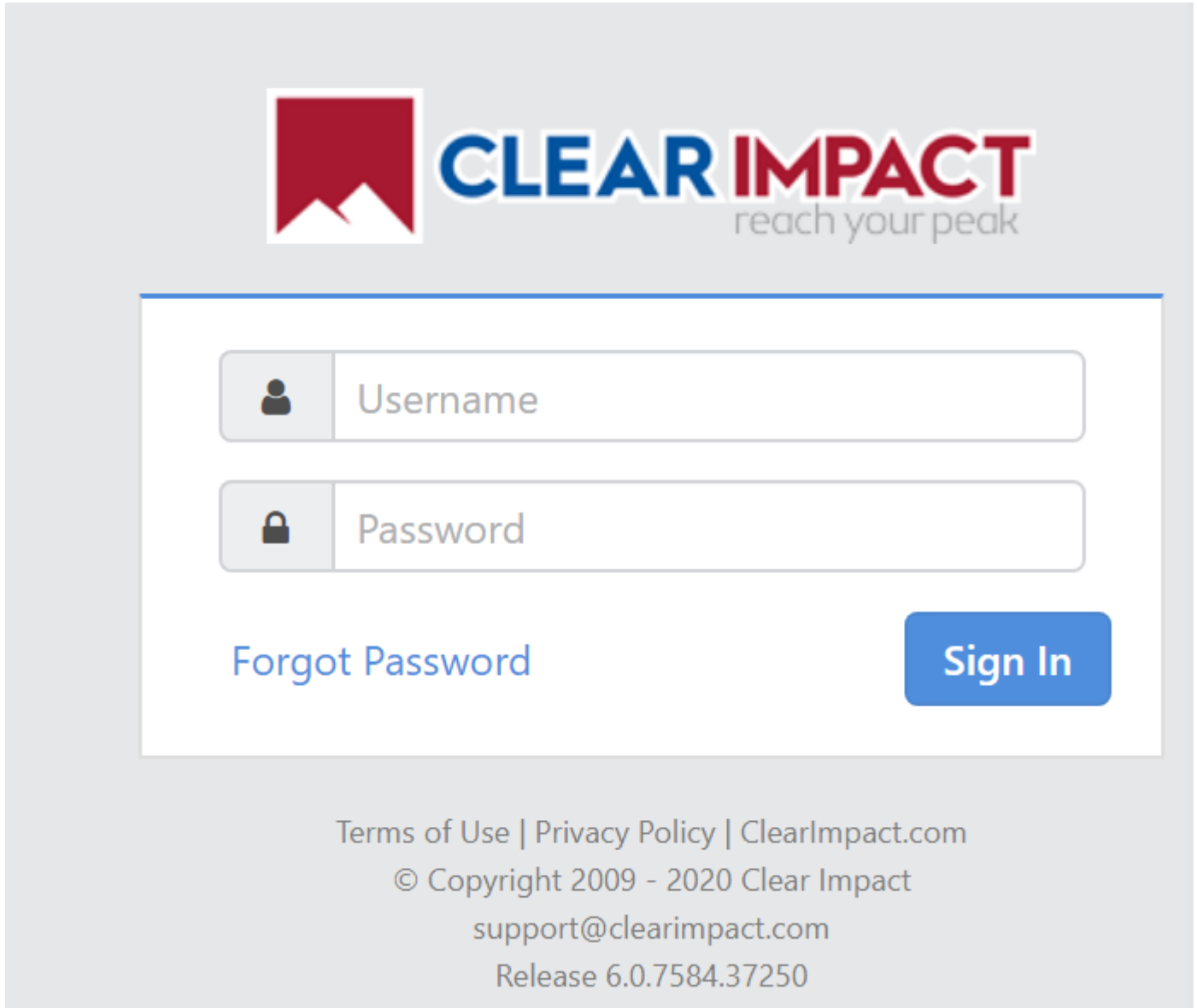
Is it mandatory?

How does it improve transparency?

Healthy North Carolina 2030 Scorecard

Export ▾ | Options ▾ | Edit | ?

- Social and Economic Factors
- Physical Environment
- Health Behaviors
- Clinical Care



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Scorecard™

Question

What is Scorecard?

How much does it cost?

Is it mandatory?

How does it improve transparency?

Answer

Scorecard is web-based software for measuring and improving public sector performance and impact.

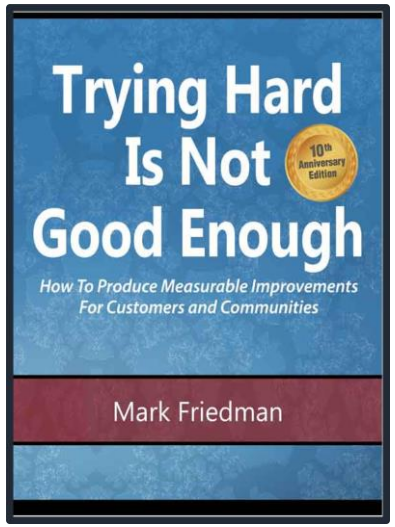
The software is free for NC CHAs and CHNAs that are working with the HNC 2030 indicators.

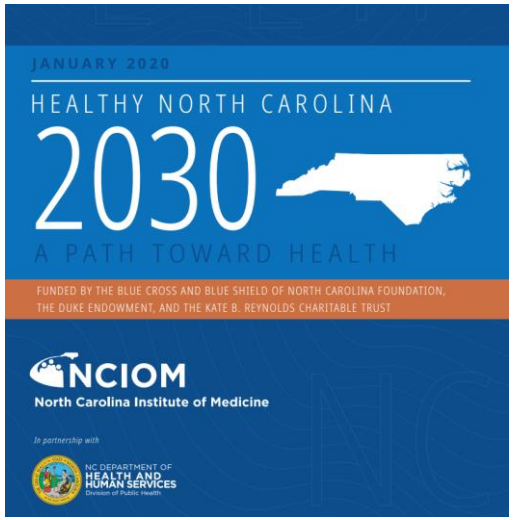
It is voluntary.

Transparency results when you share what you know about what you want to achieve, how you are doing on a few key indicators, and reveal the thinking and strategic planning behind choosing the right things to do and then doing those things well.

Today, we moved from talk to action by introducing the basic concepts behind Results-Based Accountability. We heard how HNC 2030 indicators will be incorporated into state and local community health improvement plans.

In the decade ahead, we will explore how to do the right things and do the right things well.





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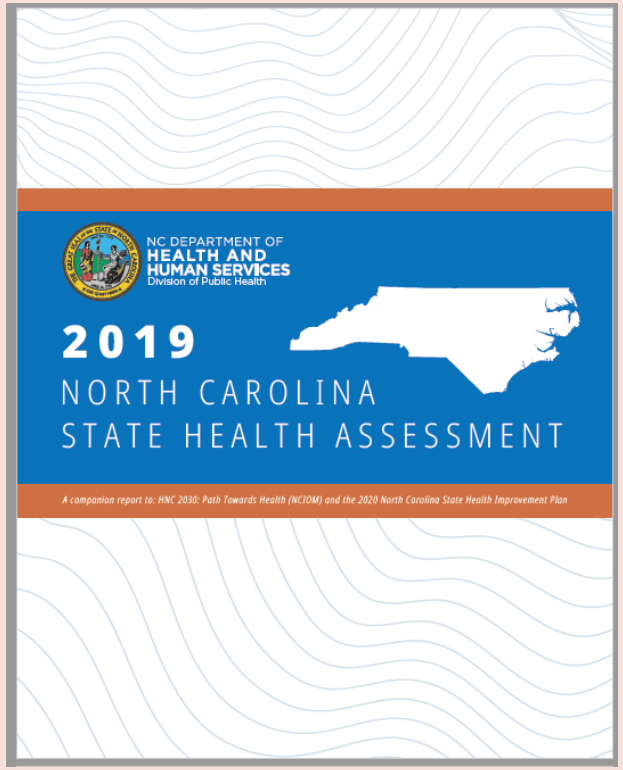

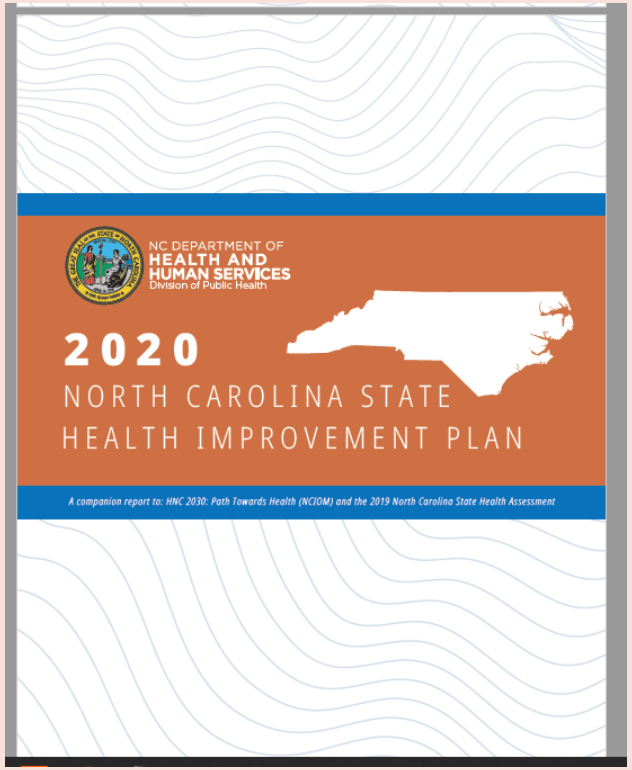

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